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			First Named Inventor		ntor	De et al.				
				Art Unit		2661				
(to be used for all correspondence after initial fi			filing)	Examiner Name		Robert	Robert W. Wilson			
Total Number of Pages in This Submission				Attorney Docket N	lumber	I-2-017	3.1US			
ENCLOSURES (Check all that apply)										
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Amendment/Reply  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority			Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Ad Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD					(Appea Propri Status	al Communication to TC al Notice, Brief, Reply Brief) etary Information s Letter Enclosure(s) (please Identify ):	
Document(s)  Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53										
	_	SIGNA	TURE O	F APPLICANT,	ATTOF	RNEY, O	R AG	ENT		
Firm Name VOLPE AND KOENIG, P.C.										
Signature	Signature									
Printed name	Printed name Michael L. Berman									
Date April 19, 2006			R			eg. No. 51,464				
I hereby certify that postage as first clas the date shown belo	s mail in a	spondence is being	facsimile tra	ATE OF TRAN ansmitted to the USP Stop Amendment, C	TO or depo	osited with	the Unite	ed States Box 145	s Postal Service with sufficient 50, Alexandria, VA 22313-1450 on	
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE rsons are required to respond to a collection of information unless it displays a valid OMB control number Under the Paperwork Reduction Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/052.943 Application Number FEE TRANSMITTAL Filing Date November 7, 2001 For FY 2006 First Named Inventor De et al. Examiner Name Robert W. Wilson Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2661 TOTAL AMOUNT OF PAYMENT 130.00 Attorney Docket No. I-2-0173.1US METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 09-0435 Deposit Account Name: InterDigital Communications Corporation For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES** Small Entity Small Entity **Small Entity** Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) 300 200 Utility 150 500 250 100 Design 200 100 100 50 130 65 Plant 200 100 300 160 80 150 300 600 150 500 300 Reissue 250 200 0 Provisional 100 0 0 Small Entity 2. EXCESS CLAIM FEES Fee (\$) Fee Description Fee (\$) 50 25 Each claim over 20 (including Reissues) 200 100 Each independent claim over 3 (including Reissues) 360 180 Multiple dependent claims **Total Claims** Extra Claims Multiple Dependent Claims Fee (\$) Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims **Extra Claims** Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee Paid (\$) Fee (\$) Total Sheets Extra Sheets (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Terminal Disclaimer 130.00

SUBMITTED BY			
Signature	MBennen	Registration No. (Attorney/Agent) 51,464	Telephone 215-568-6400
Name (Print/Type	Michael L. Berman		Date April 19, 2006

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